4. OTHER FEE(S)

PTO/SB/17 (10-08) Approved for use through 09/30/2010. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Fees Paid (\$)

670.00

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Under the Pa PADEMPORISE ON 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/019,705 **Application Number** FEE TRANSMITTA Filing Date May 13, 2002 For FY 2009 First Named Inventor Kari KALLIOJARVI **Examiner Name** Julio R. PEREZ Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2617 TOTAL AMOUNT OF PAYMENT (\$) 670.00 Attorney Docket No. 915-414 METHOD OF PAYMENT (check all that apply) ✓ Check [Credit Card Money Order Mone Other (please identify): ✓ Deposit Account Deposit Account Number: 23-0442 Deposit Account Name: Ware, Fressola et al. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) ✓ Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity** Small Entity Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 330 540 165 270 220 110

Design 220 110 100 50 140 70 Plant 220 110 330 165 170 85 Reissue 330 165 540 270 650 325 Provisional 220 110 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Total Claims Fee (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims HP = highest number of independent claims Fee (\$) HP = highest number of independent claims Fee (\$) HP = highest number of independent claims Fee (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computistings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional contents and the provided result of the paper of independent dailings and the paper of independent claims paid for size fee due is \$270 (\$135 for small entity) for each additional claims and the paper of independent claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims and the paper of independent claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims paid to the paper of independent claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims paid to the paper of independent claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims paid to size fee due is \$270 (\$135 for small entity) for each additional claims paid to size fee due is \$270 (\$135 for small e			5.0	270	220	110		_
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sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = / 50 = (round up to a whole number) x =	Total Sheets	Extra Sheets	<u>Numbér óf e</u>	ách additional	<u>50 or fráction the</u>		(\$) Fee Paid	<u>\$)</u>

SUBMITTED BY							
Signature	Jeneur	Registration No. (Attorney/Agent) 58,051	Telephone 203-261-1234				
Name (Print/T	ype) Keith R. Obert	Date Janaury 18, 2011					

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Notice of Appeal (\$540), 1-month Ext. of Time (\$130)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.